Substitute for Form PTO-875 APPLICATION AS FILED - PART I								Application or Docket Number				
500		(Column 1) (Column 2			SMALL EN			OR	OTHER THAN			
BASIC FEE (37 CFR 1.16(a), (b), or (c))	NUMBER	NUMBER FILED			RATE (\$)		EFF (4)	7	SMALL ENTI		NTITY	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))	 						FEE (\$)	1	RATE (\$)		FEE	
(37 CFR 1.16(o), (p), or (a))	1			\dashv	<u></u>			1		\dashv		
TOTAL CLAIMS (37 CFR 1.16(i))		-			<u> </u>]		+		
INDEPENDENT CLAIMS (37 CFR 1.16(h))	minus 20 = '				х =			OR	×	_		
APPLICATION SIZE	If the specification and draw sheets of paper the application		wings exceed 10		х	2		J.,	×	=		
FEE (37 CFR 1 16(s))	is \$250 (\$125 additional 50	for small enti	ly) for each	9 i i						+		
MULTIPLE DEPENDENT C				-				- 1				
If the difference in column	1 is less than roo	(0. 0.1(1.16())		_] [Γ		+		
' If the difference in column 1 is less than zero, enter '0' in column 2. APPLICATION AS AMENDED - PART II					TOTAL			_	TOTAL	+		
	mn 1)	NDED - PAF	RTII						·OIAL	. –		
Total (37 CFR + 16(1))	AIMS AINING TER DMENT Minu	HIGHES NUMBER PREVIOUS PAID FOR	T R PRESENT SLY EXTRA	7 [SMAL RATE (\$)	Ti	ADDI- ONAL EE (\$)	OR	OTHE SMALL RATE (\$)	ENTI	ADDI: IONAL	
Independent (37 CFR 1 16(h))	Minus			T ×	<u> 265 </u>			DR X	50=	F	EE (\$)	
Application Size Fee (37 CFR 1.16(s))				X	100-			OR L	300 =	-	<u> </u>	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(1))				-			\Box		*****			
			10011		TAL	 	。	R				
(Colum CLAII		(Column 2) (Column 3)	AD	D'L FEE		01	TO ADI	TAL D'L FEE			
REMAIN AFTE AMENDA	IING .	HIGHEST NUMBER PREVIOUSLY	PRESENT	R	ATE (\$)	ADI	OI.		- T			
(37 CFR 1 16(:))	Minus	PAID FOR	+=	-		TION	(\$)	1 ~	ATE (\$)	DA 101T	VAL	
Independent (37 CFR 1 16(n))	Minus		=	×	=		OR	x	=	FEE	(2)	
Application Size Fee (37 CF	R 1.16(s))		1	×			OR	×				
FIRST PRESENTATION OF MU	LTIPLE DEPENDE	IT CLAIM (37 CF	FR 1 16(J))	-			7					
I the entry in column 1 is les the "Highest Number Previ the "Highest Number Previ				TOTA			OR				\neg	

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". The "Highest Number Previously Paid For" (No THIS SPACE is less than 3, enter "3".

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the uncluding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS